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PTO/SB/05 (4/98)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY
PATENT APPLICATION
TRANSMITTALOnly for new nonprovisional applications under 37 CFR
1.53(b)

Attorney Docket No. 7882X

First Inventor or Application Identifier

Mark Robert Sivik et al.

Title

ETHER-CAPPED POLY(OXYALKYLATED)
ALCOHOL SURFACTANTS

Express Mail Label No.

TB752810729US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 202311. ☒ * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)2. ☒ Specification Total Pages [112]
(preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☐ Drawing(s) (35 USC 113) Total Sheets ☐

4. Oath or Declaration Total pages [2]

- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 16 completed)

i. ☐ DELETION OF INVENTORSSigned statement attached deleting
inventor(s) named in the prior
application, see 37 CFR §1.63(d)(2) and
1.33(b).

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY
SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS
REQUIRED (37. C.F.R. §1.27), EXCEPT IF ONE FILED IN A PRIOR
APPLICATION IS RELIED UPON (37 C.F.R. §1.28).

5. ☐ Microfiche Computer Program (Appendix)6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. ☐ Computer Readable copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))8. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)9. ☐ English Translation Document (if applicable)10. ☐ Information Disclosure ☐ Copies of IDS
Statement (IDS)/PTO-1449 Citations11. ☐ Preliminary Amendment12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)13. ☐ *Small Entity ☐ Statement filed in prior application
Statement(s) Status still proper and desired14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. /

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION or DIVISIONAL only: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

NAME

Ian S. Robinson
The Procter & Gamble Company

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11810 E. Miami River Road

CITY

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STATE

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ZIP CODE

45252

COUNTRY

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FAX

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Name (Print/Type)

Ian S. Robinson

Registration No. (Attorney/Agent)

43,348

Signature

Ian Robinson

Date

September 12, 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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09/12/00
09/660175
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☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☐ Correspondence address below

NAME	Ian S. Robinson The Procter & Gamble Company				
ADDRESS	Miami Valley Laboratories 11810 E. Miami River Road				
CITY	Cincinnati	STATE	OH	ZIP CODE	45252
COUNTRY	USA	TELEPHONE	513-627-0258	FAX	513-627-0318

Name (Print/Type)	Ian S. Robinson	Registration No. (Attorney/Agent)	43,348
Signature	<i>Ian Robinson</i>	Date	September 12, 2000

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2000</h3> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§1.27 and 1.28.</p>	<h3 style="margin: 0;">Complete if Known</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;"></td> </tr> <tr> <td>Filing Date</td> <td style="text-align: center;">September 12, 2000</td> </tr> <tr> <td>First Named Inventor</td> <td style="text-align: center;">Mark Robert Sivik et al.</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Group/Art Unit</td> <td></td> </tr> <tr> <td>Attorney Docket No..</td> <td style="text-align: center;">7882X</td> </tr> </table>	Application Number		Filing Date	September 12, 2000	First Named Inventor	Mark Robert Sivik et al.	Examiner Name		Group/Art Unit		Attorney Docket No..	7882X
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TOTAL AMOUNT OF PAYMENT (\$960.00)													

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																														
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number 16-2480 Deposit Account Name The Procter & Gamble Company <input type="checkbox"/> Charge Any Additional Fee <input type="checkbox"/> Charge the Issue Fee Set in Required Under 37 C.F.R. §1.18 at the Mailing of the Notice of Allowance 37 C.F.R. §§1.16 and 1.17</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td><input type="checkbox"/></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td><input type="checkbox"/></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td><input type="checkbox"/></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within 1st month</td><td><input type="checkbox"/></td></tr> <tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within 2nd month</td><td><input type="checkbox"/></td></tr> <tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within 3rd month</td><td><input type="checkbox"/></td></tr> <tr><td>118</td><td>1,360</td><td>218</td><td>680</td><td>Extension for reply within 4th month</td><td><input type="checkbox"/></td></tr> <tr><td>128</td><td>1,850</td><td>228</td><td>925</td><td>Extension for reply within 5th month</td><td><input type="checkbox"/></td></tr> <tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal</td><td><input type="checkbox"/></td></tr> <tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a brief in support of an appeal</td><td><input type="checkbox"/></td></tr> <tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing</td><td><input type="checkbox"/></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td><input type="checkbox"/></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Ian S. Robinson	Registration No. (Attorney/Agent)	43,348	Telephone	(513) 627-0258
Signature	<i>Ian Robinson</i>			Date	9/12/00

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